LOBBYIST ANNUAL REPORT FORM Page_____ of ____Page(s) THIS SPACE FOR OFFICE USE ONLY 9: 2 To Be Filed By: State of Idaho LOBBYISTS Ben Ysursa (Sec. 67-6619) Secretary of State (Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Period covered Date prepared year ending KENT W. DAY LIBERTY MUTUAL 1/4/2006 (Day) (Mo.) (Yr.) P. O. BOX 6358 12 31 2005 BOISE ID 83707 Item Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Category of Expenditure Proportionate amounts contributed by each employer (Identify employers, under Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity * Total Amount for Item 3, at bottom of page.) All Employers Do Not Have to be Reported Employer No. 1 Employer No. 2 Employer No. 3 Employer No. 4 Entertainment 0.00 Food and Refreshment 0.00 Living Accommodations 0.00 Advertising 0.00 Travel 0.00 Telephone 0.00 Other Expenses or Services 0.00 0.00 0.00 0.00 0.00 Total *When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be entered on Page 1. The totals of each expenditure of more than fifty dollars (\$50) for a legislator or other holder of public office. Names of Legislators & Public Officials in Group 2 Date Place Amount Continued on attached page(s)

Employer(s) Nume(s) and Address(es) INSTRUCTIONS No.1 LIBERTY MUTUAL, P.O. BOX 4555 Who should file this form: Any lobbyist registered under Section PORTLAND, OREGON 97208-4555 67-6617 Idaho Code. Filing deadline: Annual report is due on January 31st. No.2 TO BE FILED WITH: Bon Y sursa No.3 Secretary of State PO Box 83720 Boise, ID 83720-0080 No.4 Phone: (208) 334-2852 Fax: (208) 334-2282

Item 4	personal property to any Legis		lator, or for or on behalf of any legislator.							
	Date		Attroget		Name of Legislator Receiving or Benefited					
læm S	or Ho	Subject manor of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which the Lobbylet was supporting or opposing.				LEGISLATIVE SUBJECT IDENTIFICATION				
						1	Subject		Subject	
(from			ive Ident. Number		ristion Bill Number Section Number	01	Agriculture, horticulture, farming, and livestock	17	and controlled substances, health	
20			HB 41			"	Amusements, games, athletics and sports	18	insurance, hospitals Higher education	
	ŀ		HB 49	İ		03	Banking, finance, credit and	19	Housing, construction, codes	
20 20			HB 52			04	investments Children, minors, youth,	20	Insurance (excluding health insurance)	
20	- 1		HB 53			05	senior citizens Church and religion	21	Labor, salaries and wages, collective bargaining	
20			HB 54			06	Consumer affairs	22		
20	- 1		HB 63			07,	Ecology, environment, pathetien,		judges, crimes, prisons	
20	1	ŀ	HB 102			1	conservation, zoning, land and water use	23 24	License, pennits Liquor	
20		}	HB 111			08	Education	25	Manufacturing, distribution and	
	- 1		thru			09	Plections, campaigns, voting, political parties	26	services Natural resources, forest and	
20	- 1	ł	1B 120			10	Equal rights, civil rights,		forest products, fisheries, mining	
20	- 1	+	1B 141			111	minority affairs Government, financing,	27	and mining products Public lands, parks, recreation	
20	- 1	ł	1B 160				taxation, revenue, budget,	28	Social insurance, unemployment	
20		ŀ	1B 331			12	appropriations, bids, focs, funds Government, county		insurance, public assistance, workmen's compensation	
20		s	B 1027			13	Government, foderal	29	Transportation, highways,	
20		S	B 1030			14	Government, municipal Government, special districts	30	streets and roads Utilities, communications,	
20	- 1	s	B 1041			16	Government, state		televisions, radio, newspaper,	
20		S	B 1058					31	power, CATV, gas Other (please specify)	
20		s	B 1059					••	The specific	
20		S	B 1063							
20		S	B 1067				Law, ny	,	1/1/20	
20		S	B 1092				Lobbyist signature		1/6/06	
20		S	B 1093				Penantus affinereig		Nege .	
20		S	B 1158							
							Employer No. 1 signature		Date	
							Employer No. 2 signature		Date	
					a true, complete and	,	Employer No. 3 signature		Date	
ttect t	a) emen	t in accor	dance with Section	ı 67-6624	Idabe Code.					
							Employer No. 4 signature		Date	